Full name and co	FORM D-2 mplete mailing ad	Quarterly Report: (Check one:) Final Report (Fund I	balan Rep	ATRIBUTIONS AND EXPENDITURES PLEASE TYPE OR PRINT IN BLACK INK Let 2nd 3rd 4th ce on Line E must be \$0) OORT Indicated Above CHECK FOR ADDRESS CHANGE	JUL 0 5 2022 State Board of Elections Springfield Office COMMITTEE ID #
Hardin County Democratic Central Comm 119 Mt. Zion Rd Cave in Rock, IL 62919-9775					Committee ID: 316
E-mail address:				CHECK FOR E-MAIL ADDRESS CHANGE	
REPORTING PERIOD CASH AVAILABLE AT BEGINNING OF REPORTING PERIOD: \$\frac{4\llimits_{1\llimits_{2022}}}{5\llimits_{2022}}\frac{6\llimits_{2022}}{5\llimits_{2022}}\frac{5}{5}\frac{1}{5}\fr			ALL POLITICAL COMMITTE STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR SPRINGFIELD, IL 62704-4503	EES RETURN TO: STATE BOARD OF ELECTIONS 69 W WASHINGTON ST, STE LL-08 CHICAGO, IL 60602-3026	
SECTION A — RECEIPTS			SECTION B — EXPENDITURES		
b. Not-Item 2. Transfers In a. Itemized b. Not-Item 3. Loans Receiv a. Itemized b. Not-Item 4. Other Receiv a. Itemized b. Not-Item b. Not-Item	(from Schedule A) nized: (from Schedule A) nized: yed (from Schedule A) nized ots (from Schedule A) nized ots (from Schedule A) nized	\$(1): \$(2 \$(3): \$(3 \$(4 \$(4	1a) 2a) 2b) 3a) 3b) 4a) 4b)	6. Transfers Out a. Itemized (from Schedule B): b. Not-Itemized: 7. Loans Made a. Itemized (from Schedule B): b. Not-Itemized: 8. Expenditures a. Itemized (from Schedule B): b. Not-Itemized 9. Independent Expenditures a. Itemized (from Schedule B-9 b. Not-Itemized TOTAL EXPENDITURES (6a thru	\$(6b) \$(7a) \$(7b) \$(7b) \$(8a) \$(8b) \$(9a) \$(9b) \$(7b) \$(7b)
a. Itemized b. Not-Item TOTAL IN-KII **********************************	(from Schedule I): ized ND (5a + 5b)	\$(5 \$(T \$(T bmitting this report <u>if other</u> reasurer:	b) I) **	10. a. Itemized (from Schedule C): b. Not-Itemized TOTAL DEBTS & OBLIGATIONS ******************************** SECTION D — CA Cash available at beginning reporting perio Total Receipts from Section A (Tile Control Cont	\$(10a) \$(10b) \$
		· · · · · · · · · · · · · · · · · · ·	_	Investments total (if applicable	e): \$ <i>()</i> (F)

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

Jonna Loigee Austin SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE 7/1/2022